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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

PTO/SB/01		Attorney Docket Number 1935-00143										
(8/96)	3/96)			First Named Inventor Frode Røed								
DEC	DECLARATION				COMPLETE IF KNOWN							
Declaration				lication Nu	mber							
☐ Submitted with		Submitted a		g Date		ļ						
Initial Filing	Initial Filing Initial Fi			up Art Unit		<u> </u>						
				miner Nan	ne	l .						
As a below named inventor, I hereby declare that:												
My residence, post office address, and citizenship are as stated below next to my name.												
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:												
A Method and a Device for Protection of Personnel												
	(Title of the Invention)											
the specification of which ☐ is attached hereto												
OR												
⊠ was filed on (MM/D	☑ was filed on (MM/DD/YYYY) 04/03/2003			as United States Application Number or PCT								
International Number (if applicable).				d was amended on (MM/DD/YYYY) 04/26/2004								
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.												
continuation-in-part app	I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application											
and the national or PC	「internation	al filing date of	of the continu	ation-in-p	art application	١.						
I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or §365(a) of any PCT international application which designed at												
least one country other than the United States of America, listed below and have also identified below, by checking the box,												
any foreign application for patent, inventor's or breeder's rights certificate(s), or of any PCT international application having a												
filing date before that of			priority is cla	aimed.								
Prior Foreign		ountry	Foreign Fil		Priority N		Copy Attached?					
Application Number(s)			(MM/DD/	YYYY)	Claimed	·	YES NO					
				_								
20021582 Norway			04/04/200	2								
☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:												
I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.												
Application Numb	per(s)	Filing D	ate (MM/DD/	YYYY)	Addit	tional	provisional					
Application runner(s) Family Date (							numbers are					
					listed on a supplemental							
					priority sheet attached							
					here	•						
1												

DECLARATION												
I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365© of any PCT international application designated the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States of PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.												
U.S. Parent Appli		PCT Parent Nu		Pare	ent Filing Da	ate		Parent Patent Number				
Number				(M)	M/DD/YYYY	)		(if applicable)				
☐ Additional U.S.	or PCT i	nternational applic	ation nur	nbers are	listed on a	suppleme	ntal pr	ority sheet a	attached hereto.			
As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:  26753												
Name	Registration Number	n		Name 20	/33	-	Registration Number					
Daniel D. Fetterley	<del></del>	20,323		Joseph	D. Kuborn		40,689					
George H. Solveso	• 1	25,927	•	Jeffrey					,686			
Gary A. Essmann		29,376		Peter T.	Holsen		54,180					
Thomas M. Wozny	у	28,922			. Olejniczal	<b>(</b>			,853			
Michael E. Taken		28,120		William	L. Falk			27	,709			
Joseph J. Jochma	in	25,058										
☐ Additional attor	rney(s) ar	nd/or agent(s) nam	ed on a	suppleme	ntal sheet a	attached he	ereto.					
Direct all correspondence to: XI Customer Number: 26753  Discuss uSilespo de 35.3 Casa o ta 30 Correspondence address below  O time of capa de consultations below												
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	Daniel D.			· · · ·				,	C CC acc cos cc cw			
NAME C	Daniel D.				LP				C CC acc cos cc cw			
NAME E	Daniel D.	Fetterley	KE & SA		LP				C CC acc cos cc cw			
NAME CADDRESS 1	Daniel D.	Fetterley SCEALES, STAR Wisconsin Avenue	KE & SA		LP				C CC ACC C33 CC CW			
NAME CAMPADDRESS 1	Daniel D. ANDRUS, 100 East \( \) Suite 110	Fetterley  SCEALES, STAR  Wisconsin Avenue	KE & SA	WALL, L		sin		ZIP CODE	53202-4178			
NAME CAME ADDRESS 1 SCITY M	Daniel D. ANDRUS, 100 East \ Suite 110 Milwaukee	Fetterley  SCEALES, STAR  Wisconsin Avenue	KE & SA	WALL, LI	Wiscon			ZIP CODE	53202-4178			
NAME CAME ADDRESS 1 SCITY MCCOUNTRY L	Daniel D.  ANDRUS, 100 East \( \)  Suite 110 \( \)  Milwaukee  J.S.A.	Fetterley  SCEALES, STAR  Wisconsin Avenue  0	KE & SA	WALL, L	Wiscon:	71-7590		ZIP CODE	53202-4178 (414) 271-5770			
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						Atty. Docket No. 1935-00143							
	DECLARATION						ADDITIONAL INVENTOR(S) Supplemental Sheet						
Name	of Additional .	Joint Inv	entor, if any	<u> </u>		A petitio	n has	been file	for this	uns	igned inve	ntor	
	Given Name (first and middle [if any])					Family Name or Surname							
Sigve	, ,	Bi				Sandv	ik		,				
Inven Signa	tor's	Sign	ve Sa	and will			Da	te 78/9	-04	_			
RESI	DENCE: City	Sandn	es Nox	State		Countr	y	Norway		Citi	zenship	Norwegian	
	OFFICE ADDR	ESS	Ims						_				
City	Sandnes			State		Zip	N-43	08	Country	y	Norway		